



05-06-05

AFI 2633 #  
Terry

PTO/SB/31 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031  
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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) <b>55340 (70840)</b>
In re Application of Takuma Hiramatsu		
Application Number <b>09/674,068-Conf. #9269</b>		Filed <b>April 6, 2001</b>
For <b>SPACE-DIVISION MULTIPLEX FULL-DUPLEX LOCAL AREA NETWORK</b>		
Art Unit <b>2633</b>	Examiner <b>C. M. Nguyen</b>	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ <b>500.00</b>
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u><b>04-1105</b></u> . I have enclosed a duplicate copy of this sheet.		
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.		
I am the		
<input type="checkbox"/> applicant /inventor. <u><b>David A. Tucker</b></u> Signature		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u><b>27,840</b></u> (617) 517-5508 _____ Telephone number		
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. <u><b>May 4, 2005</b></u> _____ Date		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
<input type="checkbox"/> *Total of <u><b>1</b></u> forms are submitted.		

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